



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME Cook, John (Mr.)

15 ACCOUNT # (Ethics Commission filers)  
00044459

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

CITY CLERK DEPT.  
10 JAN 15 PM 12:19

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 8,975.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 9,169.43

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 293.03  
~~0.00~~  
JC

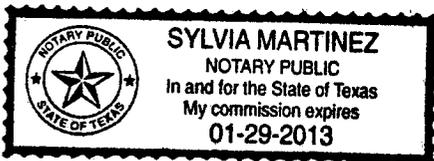
OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

### 18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

*John F. Cook*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John F. Cook, this the 15<sup>th</sup> day of January, 2010, to certify which, witness my hand and seal of office.

*Sylvia Martinez*  
Signature of officer administering oath

Sylvia Martinez  
Print name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/6 Report: 3/21

10 JAN 11 PM 12:19  
 CITY CLERK DEPT.

2 FILER NAME Cook, John (Mr.)

3 ACCOUNT # (Ethics Commission filed)  
00044459

4 Date 09/15/2009  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Brock, Margo and Randy (Mr. and Mrs.)

7 Amount of contribution (\$) \$500.00  
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
417 Executive Center Blvd  
El Paso, TX 79902

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Clay, Yolanda (Ms.)

Amount of contribution (\$) \$25.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
9557 Pistachio  
El Paso, TX 79924

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Conde, Tony (Mr.)

Amount of contribution (\$) \$300.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
767 Via Lanza  
El Paso, TX 79912-6648

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Engles, Jan and Bruce (Mr. and Mrs.)

Amount of contribution (\$) \$25.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
2219 King James Place  
El Paso, TX 79903

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Gezelius, Kenneth and Show-Ying (Mr. and Mrs.)

Amount of contribution (\$) \$250.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3659 Tierra Vergel  
El Paso, TX 79938-4340

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 2/6 Report: 4/21

2 FILER NAME Cook, John (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00044459

4 Date 09/15/2009  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Gordon, Cheryl and Norman (Mr. and Mrs.)

7 Amount of contribution (\$) \$250.00  
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
808 Wingfoote  
El Paso, TX 79912

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

CITY CLERK DEPT.  
SEP 15 PM 1:19

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Jobe, Stanley and Martie (Mr. and Mrs.)

Amount of contribution (\$) \$1,000.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
5588 Westside Drive  
El Paso, TX 79932

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, Travis (Mr.)

Amount of contribution (\$) \$500.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
201 E. Main  
Ste 1600  
El Paso, TX 79901

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Kalman, Mannie (Mr.)

Amount of contribution (\$) \$300.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
701 N. Saint Vrain  
El Paso, TX 79902

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 09/15/2009  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Kelly, James and Donna (Mr. and Mrs.)

Amount of contribution (\$) \$100.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1511 Rim Road  
El Paso, TX 79902

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 4/6 Report: 6/21

2 FILER NAME Cook, John (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00044459

4 Date  
09/15/2009

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Melver, Jimmy and Donna (Mr. and Mrs.)

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
4746 Academy Circle  
El Paso, TX 79924-3229

\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
09/15/2009

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Moore, Mervin and Linda (Mr. and Mrs.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
519 E. Hague  
El Paso, TX 79902

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/15/2009

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Moreno, Dora (Mrs.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
5217 Hondo Pass  
El Paso, TX 79924

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/15/2009

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
O'Leary, Randal (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
7901 Gateway East  
STE 102  
El Paso, TX 79915

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/15/2009

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Oliva, Joe (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
10100 Dyer  
El Paso, TX 79924-4246

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

CITY CLERK DEPT.  
10 JAN 15 PM 12: 59

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 5/6 Report: 7/21

2 FILER NAME Cook, John (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00044459

4 Date 5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Olivas, Dan and Patti (Mr. and Mrs.)

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)  
\$50.00  
(If travel outside of Texas, complete Schedule T)

6 Contributor address; City; State; Zip Code  
240 Thunderbird  
El Paso, TX 79912

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Reddy, Pratr and Vijaya (Mr. and Mrs.)

Amount of contribution (\$) In-kind contribution description (if applicable)  
\$1,000.00  
(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code  
6629 Mariposa Dr.  
El Paso, TX 79912-3215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Robinson, Carl (Rep.)

Amount of contribution (\$) In-kind contribution description (if applicable)  
\$1,000.00  
(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code  
10732 Texarkana  
El Paso, TX 79924

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Rosenbaum, Noel (Mrs.)

Amount of contribution (\$) In-kind contribution description (if applicable)  
\$200.00  
(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code  
405 Valplano  
El Paso, TX 79912-1706

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Salom Family Partnership

Amount of contribution (\$) In-kind contribution description (if applicable)  
\$200.00  
(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code  
807 South El Paso Street  
El Paso, TX 79901

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

10 JAN 15 PM 12:19  
CITY CLERK DEPT.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

10 JAN 5 PM 12:19

CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 6/6 Report: 8/21

**2** FILER NAME Cook, John (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00044459

**4** Date **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Scepanski, David and Anne (Mr. and Mrs.)

**7** Amount of contribution (\$) **8** In-kind contribution description (if applicable)

**6** Contributor address; City; State; Zip Code  
10421 Gaius Dr  
El Paso, TX 79924

\$200.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Scherr, James (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
109 N. Oregon  
Ste 1200  
El Paso, TX 79901

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Shapiro, Barbara (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1029 Turnberry Rd  
El Paso, TX 79912

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Tanner, Trish (Ms.)

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
5917 Mira Hermosa Dr  
El Paso, TX 79912

\$150.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
09/15/2009 Teschner, Richard (Dr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1800 N. Stanton  
Apt 302  
El Paso, TX 79902-3541

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL EXPENDITURES

# SCHEDULE F

CITY CLERK DEPT.  
10 JAN 5 PM 12:20

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/12 Report: 9/21
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00044459
<b>4</b> Date  12/07/2009	<b>5</b> Payee name American Airlines  ..... <b>6</b> Payee address; City; State; Zip Code  TX	<b>7</b> Amount (\$)  \$40.99
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Tram's airfare to DC for NLC board meeting  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/17/2009	Payee name AT&T  ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$100.00
Purpose of payment (See instructions regarding type of information required.) 915-227-9699  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  08/25/2009	Payee name AT&T  ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$28.10
Purpose of payment (See instructions regarding type of information required.) www.johnfcook.com  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/15/2009	Payee name AT&T  ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$50.00
Purpose of payment (See instructions regarding type of information required.) 915-227-9699  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

CITY CLERK DEPT.  
 10 JAN 15 PM 12:20

# POLITICAL EXPENDITURES

**SCHEDULE F**

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 2/12 Report: 10/21
<b>2 FILER NAME</b> Cook, John (Mr.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00044459
<b>4 Date</b>  09/28/2009	<b>5 Payee name</b> AT&T  ..... <b>6 Payee address; City; State; Zip Code</b>  TX	<b>7 Amount (\$)</b>  \$50.00
<b>8 Purpose of payment</b> (See instructions regarding type of information required.) 915-227-9699  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9 ** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
Date  09/29/2009	Payee name AT&T  ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$30.00
Purpose of payment (See instructions regarding type of information required.) www.johnfcook.com  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/14/2009	Payee name AT&T  ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$30.00
Purpose of payment (See instructions regarding type of information required.) www.johnfcook.com  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  11/21/2009	Payee name AT&T  ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$30.00
Purpose of payment (See instructions regarding type of information required.) www.johnfcook.com  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/12 Report: 11/21
2 FILER NAME Cook, John (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00044459
4 Date 11/21/2009	5 Payee name AT&T ..... 6 Payee address; City; State; Zip Code  TX	7 Amount (\$)  \$50.00
8 Purpose of payment (See instructions regarding type of information required.) 915-227-9699  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date 12/15/2009	Payee name AT&T ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$50.00
Purpose of payment (See instructions regarding type of information required.) 915-227-9699  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date 12/17/2009	Payee name AT&T ..... Payee address; City; State; Zip Code  TX	Amount (\$)  \$30.00
Purpose of payment (See instructions regarding type of information required.) www.johnfcook.com  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date 09/14/2009	Payee name Bank of America ..... Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$100.00
Purpose of payment (See instructions regarding type of information required.) charge on campaign credit card to move account balance to lower interest account  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 4/12 Report: 12/21
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00044459
<b>4</b> Date  11/05/2009	<b>5</b> Payee name Bank of America  <b>6</b> Payee address; City; State; Zip Code  El Paso, TX	<b>7</b> Amount (\$)  \$12.43
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Finance charge on campaign credit card  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/29/2009	Payee name Big Bun Restaurant  Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$19.45
Purpose of payment (See instructions regarding type of information required.) Lunch meeting with Times Editorial Board Members  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/19/2009	Payee name Bob's Steak House - Omni Hotel  Payee address; City; State; Zip Code  Ft. Worth, TX	Amount (\$)  \$147.77
Purpose of payment (See instructions regarding type of information required.) Meal not covered by TML  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/19/2009	Payee name Chase Bank Credit Cards  Payee address; City; State; Zip Code	Amount (\$)  \$75.00
Purpose of payment (See instructions regarding type of information required.) Transaction Fee to transfer balance  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 5/12 Report: 13/21
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00044459
<b>4</b> Date  09/15/2009	<b>5</b> Payee name City of El Paso - Feed the Homeless Account  <b>6</b> Payee address; City; State; Zip Code	<b>7</b> Amount (\$)  \$60.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) For Thanksgiving planning meeting luncheon  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/15/2009	Payee name Cook, Tram  Payee address; City; State; Zip Code 3224 Mesa Verde Lane El Paso, TX 79904	Amount (\$)  \$2,000.00
Purpose of payment (See instructions regarding type of information required.) Payment on loan to campaign account  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/16/2009	Payee name Cook, Tram  Payee address; City; State; Zip Code 3224 Mesa Verde Lane El Paso, TX 79904	Amount (\$)  \$1,000.00
Purpose of payment (See instructions regarding type of information required.) Payment on loan to campaign account  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/29/2009	Payee name Cricket  Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$47.94
Purpose of payment (See instructions regarding type of information required.) Campaign Manager's Cellular Phone  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

CITY CLERK DEPT.

## SCHEDULE F

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 6/12 Report: 14/21

**2** FILER NAME Cook, John (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00044459

4 Date	5 Payee name	7 Amount (\$)
08/05/2009	Cricket	
6 Payee address; City; State; Zip Code		\$165.36
El Paso, TX		

**8** Purpose of payment (See instructions regarding type of information required.)  
Cellular Phone Bank

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date	Payee name	Amount (\$)
10/27/2009	Cricket	
6 Payee address; City; State; Zip Code		\$47.91
El Paso, TX		

Purpose of payment (See instructions regarding type of information required.)  
Campaign Manager's Cellular

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date	Payee name	Amount (\$)
11/05/2009	Cricket	
6 Payee address; City; State; Zip Code		\$165.00
El Paso, TX		

Purpose of payment (See instructions regarding type of information required.)  
Phone bank

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date	Payee name	Amount (\$)
07/19/2009	David's Apparel	
6 Payee address; City; State; Zip Code		\$575.20
Carnige El Paso, TX		

Purpose of payment (See instructions regarding type of information required.)  
Campaign T-shirts

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/12 Report: 15/21
2 FILER NAME Cook, John (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00044459
4 Date  07/18/2009	5 Payee name David's Pennants and Banners  ..... 6 Payee address; City; State; Zip Code Carnige El Paso, TX	7 Amount (\$)  \$1,273.00
8 Purpose of payment (See instructions regarding type of information required.) Campaign signs  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/31/2009	Payee name Delta Airlines  ..... Payee address; City; State; Zip Code	Amount (\$)  \$740.90
Purpose of payment (See instructions regarding type of information required.) (See travel info on Schedule T)  (If travel outside of Texas, complete Schedule T) <input checked="" type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  08/10/2009	Payee name Doubletree Hotel  ..... Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$14.20
Purpose of payment (See instructions regarding type of information required.) Meeting with Jim Scherr and Bill Moody  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  12/04/2009	Payee name Eastside Cafe  ..... Payee address; City; State; Zip Code Rojas Street El Paso, TX	Amount (\$)  \$36.12
Purpose of payment (See instructions regarding type of information required.) Breakfast meeting with MPO staff and TPB leadership  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 8/12 Report: 16/21
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00044459
<b>4</b> Date  11/05/2009	<b>5</b> Payee name Greater Chamber of Commerce  ..... <b>6</b> Payee address; City; State; Zip Code  El Paso, TX	<b>7</b> Amount (\$)  \$50.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Chamber Gala featuring Rick Perry  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  08/10/2009	Payee name International House of Pancakes  ..... Payee address; City; State; Zip Code Gateway Blvd El Paso, TX	Amount (\$)  \$59.69
Purpose of payment (See instructions regarding type of information required.) Breakfast meeting with MPO staff and TPB Leadership  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  11/23/2009	Payee name Jaxon's Restaurant  ..... Payee address; City; State; Zip Code Mesa Street El Paso, TX	Amount (\$)  \$30.07
Purpose of payment (See instructions regarding type of information required.) Lunch meeting with Mayor Don Henderson  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  11/12/2009	Payee name Joe's Crab Shack  ..... Payee address; City; State; Zip Code  San Antonio, TX	Amount (\$)  \$65.27
Purpose of payment (See instructions regarding type of information required.) Non reimbursed meal at National League of Cities Annual Meeting  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 9/12 Report: 17/21

**2** FILER NAME Cook, John (Mr.)

**3** ACCOUNT # (Ethics Commission filers)  
00044459

<b>4</b> Date	<b>5</b> Payee name Omni Hotel	<b>7</b> Amount (\$)
10/19/2009	<b>6</b> Payee address; City; State; Zip Code  Dallas, TX	\$26.62

**8** Purpose of payment (See instructions regarding type of information required.)  
Meal not covered by TML  
  
(If travel outside of Texas, complete Schedule T)

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

<b>Date</b>	<b>Payee name</b> Rosetta Stone	<b>Amount (\$)</b>
11/30/2009	<b>Payee address; City; State; Zip Code</b>  TX	\$215.42

Purpose of payment (See instructions regarding type of information required.)  
Spanish Language Course  
  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

<b>Date</b>	<b>Payee name</b> Sam's Club	<b>Amount (\$)</b>
09/09/2009	<b>Payee address; City; State; Zip Code</b>  El Paso, TX	\$411.96

Purpose of payment (See instructions regarding type of information required.)  
For September Fundraiser  
  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

<b>Date</b>	<b>Payee name</b> Sonny Melendrez Productions	<b>Amount (\$)</b>
07/20/2009	<b>Payee address; City; State; Zip Code</b>  San Antonio, TX	\$400.00

Purpose of payment (See instructions regarding type of information required.)  
Web TV spot production  
  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/12 Report: 18/21
2 FILER NAME Cook, John (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00044459
4 Date  08/13/2009	5 Payee name Southwest Airlines  6 Payee address; City; State; Zip Code  TX	7 Amount (\$)  \$49.94
8 Purpose of payment (See instructions regarding type of information required.) Charge to change flight arrangements  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  08/13/2009	Payee name Southwest Airlines  Payee address; City; State; Zip Code  TX	Amount (\$)  \$5.00
Purpose of payment (See instructions regarding type of information required.) Ticket Fee  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  11/04/2009	Payee name Southwest Airlines  Payee address; City; State; Zip Code  TX	Amount (\$)  \$282.70
Purpose of payment (See instructions regarding type of information required.) 1st Lady's travel to Dallas for TML event  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/16/2009	Payee name Student Government Association - UTEP  Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$52.00
Purpose of payment (See instructions regarding type of information required.) Speaker at SGA awards banquet  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

10 JAN 15 PM 12: 20

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 11/12 Report: 19/21
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00044459
<b>4</b> Date  09/09/2009	<b>5</b> Payee name Sutherland, Ken  ..... <b>6</b> Payee address; City; State; Zip Code  El Paso, TX	<b>7</b> Amount (\$)  \$200.00
<b>8</b> Purpose of payment (See instructions regarding type of information required.) To purchase supplies for BBQ fundraiser  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/10/2009	Payee name U-Haul  ..... Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$25.80
Purpose of payment (See instructions regarding type of information required.) Propane for BBQ fundraiser  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/16/2009	Payee name UTEP Women in Business Association  ..... Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$35.00
Purpose of payment (See instructions regarding type of information required.) Snow cones for fundraiser event  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/18/2009	Payee name UTEP Women in Business Association  ..... Payee address; City; State; Zip Code  El Paso, TX	Amount (\$)  \$30.00
Purpose of payment (See instructions regarding type of information required.) Snow cones for fundraiser event  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

CITY CLERK DEPT.

## SCHEDULE F

10 JAN 15 PM 12:20

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 12/12 Report: 20/21

2 FILER NAME Cook, John (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00044459

4 Date  
11/26/2009

5 Payee name  
Zuni Grill - San Antonio  
.....  
6 Payee address; City; State; Zip Code  
San Antonio, TX

7 Amount (\$)  
\$60.68

8 Purpose of payment (See instructions regarding type of information required.)

Non reimbursed meal at National League of Cities Annual Meeting

(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

# IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.

10 JAN 15 PM 12:25

PAGE #  
Schedule: 1/1 Report: 21/21

2 FILER NAME Cook, John (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00044459

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee  
Delta Airlines

5 Contribution / Expenditure reported on:

- Schedule A     Schedule B     Schedule C     Schedule D     Schedule F     Schedule G
- Schedule H     Schedule N     COH-UC     COH-T     PAC-C     PAC-E

6 Dates of travel

10/31/2009

10/31/2009

7 Name of person(s) traveling

Cook, Tram (Mrs.)

8 Departure city or name of departure location

El Paso

9 Destination city or name of destination location

Orlando

10 Means of transportation  
Airfare

11 Purpose of travel (including name of conference, seminar, or other event)  
To speak at DOD conference regarding impacts of BRAC on growing communities